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on December 1, 2004 (Date of Deposit).

Date

Name

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

(Attorney Docket No.: 02-090-Z)

PATENT

In re Application of:

Bakthavatchalam et al.

Serial No.: 10/799,286

Filed: March 12, 2004

For: Capsaicin Receptor Ligands

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Examiner: Kevin E. Weddington

Art Unit: 1614

Confirmation No.: 8664

RESPONSE TO THE RESTRICTION REQUIREMENT

MAILED NOVEMBER 1, 2004

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the Restriction Requirement mailed November 1, 2004, Applicants elect the claims of Group I, i.e., claims 186, 187, and 199-208, for prosecution.

Applicants note that the Examiner has requested that the Applicants "also show the difference between claims 186, 187, 199, and 200 versus claims 201-208 for treating pain caused by different condition." Applicants do not understand the Examiner's

request or the basis thereof. All of claims 186, 187, 199, 200, and 202-208 depend either directly or indirectly from claim 201. Moreover, claims 201-204 do not mention any specific types of pain. Thus, while Applicants would be willing to respond to this request, further clarification is necessary to do so. Applicants also note that the Examiner suggested an alternative mode of reply to this request, i.e., to "simply further elect between the two 'pain' groupings." Applicants are also unable to adopt this suggestion since it is not clear what "two pain groupings" are being referred to. Again, claims 201-204 do not mention any specific types of pain. Applicants respectfully request the Examiner to provide further clarification so that an appropriate reply can be submitted.

Should the Examiner believe that a discussion of this matter would be helpful, he is invited to telephone the undersigned at (312) 913-0001.

Respectfully submitted,

DATED: December 1, 2004

By: 

Steven J. Sarussi
Reg. No. 32,784

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(MBHB 02-090-Z)

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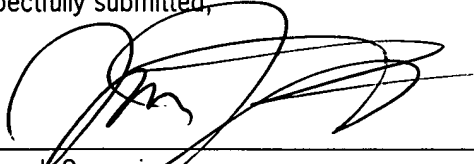
Commissioner for Patents
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TRANSMITTAL LETTER

1. We are transmitting herewith the attached papers for the above-identified new patent application:
 - a. ☒ Transmittal letter with duplicate
 - b. ☒ Response to the Restriction Requirement Mailed November 1, 2004
 - c. ☒ Return Postcard
2. ☒ No additional fee is required.
3. **GENERAL AUTHORIZATION TO CHARGE OR CREDIT FEES:** Please charge any additional fees or credit overpayment to Deposit Account No. **13-2490**. A duplicate copy of this sheet is enclosed.
4. **CERTIFICATE OF MAILING UNDER 37 CFR § 1.8:** The undersigned hereby certifies that this Transmittal Letter and the paper, as described in paragraph 1 hereinabove, are being deposited with the United States Postal Service with sufficient postage as "First Class Mail" in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on this 1st day of December, 2004.

Respectfully submitted,

By:


Steven J. Sarussi
Registration No. 32,784